

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF

*United States of America*

COURT CASE NUMBER

*05-30079-MAP*

DEFENDANT

*Bernard M. Albert*

TYPE OF PROCESS

*Summons + Complaint***SERVE**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

*BERNARD ALBERT*

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

**AT***18 Williamsburg Road, Worthington, MA 01098**P.O. Box**265*

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

*NANCY M ROJAS  
U.S. Attorney's Office  
Federal Building Unit  
One Courthouse Way  
Boston, MA 02210*

Number of process to be served with this Form - 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

*Please make service prior to June 30, 2005**2005 APR -5 P 2:00**RECEIVED  
U.S. MARSHAL SERVICE  
BOSTON, MA  
4/25/05*

Signature of Attorney or other Originator requesting service on behalf of:

*[Signature]*☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

*617-745-3255*

DATE

*4/25/05***SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**I acknowledge receipt for the total number of process indicated.  
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

*1*

District of Origin

*38*

District to Serve

*38*

Signature of Authorized USMS Deputy or Clerk

*Nancy Salas*

Date

*4/25/05*I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service

*7/1/05*

Time

*10:00 AM*

Signature of U.S. Marshal or Deputy

*[Signature]*

Service Fee

Total Mileage Charges  
(including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

REMARKS:

*FWD to USMS in Springfield, MA 04/05/05 nt. Service attempted at Above Address on 6/28/05. Bernard Albert in Serious med. cal Condition at Area Hospital, wife was home. however also very elderly + questioned her judgment + mental status. Reported findings to office of US Attorney, Boston, MA (Nancy Rojas), Directed to Continue Service*PRIOR EDITIONS  
MAY BE USED

1. CLERK OF THE COURT

FORM USM-285 (Rev. 12/15/80)

AO 440 (Rev. 10/93) Summons in a Civil Action

# United States District Court

DISTRICT OF MASSACHUSETTS

UNITED STATES OF AMERICA

V.

BERNARD M. ALBERT

## SUMMONS IN A CIVIL CASE

CASE NUMBER:

05-30079-MAP

TO: (Name and address of defendant)

BERNARD M. ALBERT  
18 Williamsburg Road  
Worthington, MA 01098

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Christopher R. Donato  
Assistant United States Attorney  
United States Attorney's Office  
1 Courthouse Way, Suite 9200  
Boston, MA 02210

an answer to the complaint which is herewith served upon you, within twenty (20) days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

**SARAH A. THORNTON**

CLERK

*Mary Jean*

(BY) DEPUTY CLERK

DATE

*March 31, 2005*

AO 440 (Rev. 10/93) Summons in a Civil Action

**RETURN OF SERVICE**

Service of the Summons and Complaint was made by me 1

DATE

NAME OF SERVER (PRINT)

TITLE

Check one box below to indicate appropriate method of service

☐ Served personally upon the defendant. Place where served:☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.  
Name of person with whom the summons and complaint were left:☐ Returned unexecuted:☐ Other (specify)

TRAVEL

**STATEMENT OF SERVICE FEES**

SERVICES

TOTAL

**DECLARATION OF SERVER**

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on

Date

Signature of Server

Address of Server

(1) As to who may serve a summons see Rule 4 the Federal Rules of Civil Procedure.